

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL		Application Number 10/028,738	
		Filing Date October 22, 2001	
		First Named Inventor Ottoboni	
		Group Art Unit 3737	
		Examiner Name William Jung	
		Attorney Docket No. A-72273/AMP/TJH/SPL	

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-captioned application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application

CERTIFICATE OF FACSIMILE TRANSMISSION
 I hereby certify that this document or fee is sent via facsimile to facsimile number 703-872-9306, which is the facsimile number to the Office of Patents at the United States Patent and Trademark Office on 2/24/04, 2004.
 Signed: [Signature]
 Steve Lendaris

1. Submission required under 37 C.F.R. § 1.114

a. ☐ Previously submitted
 i. ☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____
 (Any unentered amendment(s) referred to above will be entered.)
 ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
 iii. ☐ Other: _____
 b. ☒ Enclosed
 i. ☐ Amendment/Reply
 ii. ☐ Affidavit(s)/Declaration(s)
 iii. ☒ Information Disclosure Statement (including Form PTO-1449 and References)
 iv. ☐ Other: _____

2. Miscellaneous

a. ☐ Suspension of action on the above-captioned application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed three months; Fee under 37 C.F.R. § 1.17(i) required.)
 b. ☐ Other: _____

3. Fees The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.

a. <input checked="" type="checkbox"/> The Fees are calculated as follows:	AMOUNT	<input type="checkbox"/> Large Entity	<input checked="" type="checkbox"/> Small Entity
i. <input checked="" type="checkbox"/> RCE BASIC FEE	\$ 385	\$ 770.00	\$ 385.00
ii. <input type="checkbox"/> EXTENSION FEES	\$	One-Month 410.00 Two-Month 410.00 Three-Month 930.00 Four-Month 1450.00 Five-Month 1970.00	\$ 55.00 205.00 465.00 725.00 985.00
iii. <input type="checkbox"/> OTHER	\$	\$	\$

b. ☐ Check in the amount of \$ _____ is enclosed. The Commissioner is hereby authorized to charge any variance between the amount enclosed and the Patent Office charges to Deposit Account No. 50-2319.
 c. ☒ The Commissioner is hereby authorized to charge the fees as indicated above, charge any variance or credit any overpayments, to Deposit Account No. 50-2319 (our Order No. A-72273/AMP/TJH/SPL/470255-00037).

SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name	Steven P. Lendaris	Registration No.	53,202
Signature	<u>[Signature]</u>	Date	<u>2/24/04</u>